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June 23, 2003

GROUP: 3683**FAX NUMBER: 1-703-872-9307****ATTORNEY DOCKET NO.: SIT-0106****SERIAL NO.: 09/954,994****FILED: September 18, 2001****NUMBER OF PAGES: 25**
(including this sheet)**OFFICIAL****FAX RECEIVED**

JUN 25 2003

GROUP 3600**MESSAGE:** Attached is a Response to the Final Rejection dated March 21, 2003.**URGENT! PLEASE DELIVER IMMEDIATELY UPON RECEIPT. THANK YOU!**

* * * * *

If you have any questions, or did not receive the proper number of pages, or had trouble
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AMENDMENT TRANSMITTAL LETTER (Small Entity) Applicant(s): Esche and Nazalewicz				Docket No. SIT-0106
Serial No. 09/954,994	Filing Date September 18, 2001	Examiner Melody M. Burch	Group Art Unit 3683	
Invention: ADAPTIVE SHOCK AND VIBRATION ATTENUATION USING ADAPTIVE ISOLATORS				
<u>TO THE COMMISSIONER FOR PATENTS:</u>				
Transmitted herewith is an amendment in the above-identified application.				
<input checked="" type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted. <input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.				
The fee has been calculated and is transmitted as shown below.				
CLAIMS AS AMENDED				
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE
TOTAL CLAIMS	2 -	20 =	0	x \$9.00
INDEP. CLAIMS	2 -	3 =	0	x \$42.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>				
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT				
\$0.00				
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____. <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1619 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.				
 <u>Signature</u>				
Dated: June 23, 2003				
<p>Kathleen A. Tyrrell Reg. No. 38,350 Licata & Tyrrell P.C. 66 E. Main Street Marlton, NJ 08053 Tel: 856-810-1515 Fax: 856-810-1454</p>				
<p>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</p>				
<u>Signature of Person Mailing Correspondence</u>				
Typed or Printed Name of Person Mailing Correspondence				

CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8)

Applicant(s): Esche and Nazalewicz

Docket No.

SIT-0106

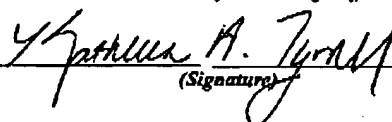
Serial No.
09/954,994Filing Date
September 18, 2001Examiner
Melody M. BurchGroup Art Unit
3683Invention: **ADAPTIVE SHOCK AND VIBRATION ATTENUATION USING ADAPTIVE ISOLATORS**

I hereby certify that this Reply under 37 C.F.R. 1.116
(Identify type of correspondence)

is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. 703-872-9307)

on June 23, 2003
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Kathleen A. Tyrrell
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(Signature)

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